MULTIPLE DEPENDENT CLAIM SERIAL NO. FILING DATE 3-23-06 FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) **CLAIMS AFTER AFTER** AFTER AFTER **AS FILED AS FILED** I" AMENDMENT 2 nd AMENDMENT 1" AMENDMENT 2 MAMENDMENT IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. TOTAL TOTAL IND. IND. TOTAL TOTAL DEP. DEP.

TOTAL

CLAIMS

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TOTAL

CLAIMS